Fill in this information to identify the case:					
Debtor name Benja Incorporated					
United States Bankruptcy Court for the: Northern	District of CA (State)				
Case number (If known):20-30819					

☐ Check if this is an amended filing

## Official Form 207

## Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part	1: Income						
1. <b>Gr</b> d	oss revenue from business						
	None						
	Identify the beginning and en may be a calendar year	ding dat	es of the debtor'	s fiscal	year, which	Sources of revenue Check all that apply	Gross revenue (before deductions and exclusions)
	From the beginning of the fiscal year to filing date:	From	01/01/2020 MM / DD / YYYY	to	Filing date	Operating a business Other	\$_20,952,100
	For prior year:	From	01/01/2019 MM / DD / YYYY	to	12/31/2019 MM / DD / YYYY	Operating a business Other	<u>\$ 13,471,716</u>
	For the year before that:	From	06/18/2018 MM / DD / YYYY	to	12/31/2018 MM / DD / YYYY	Operating a business Other	\$ 5,284,518
Inc						ne may include interest, dividends, mor ately. Do not include revenue listed in	line 1.
						Description of sources of revenue	Gross revenue from each source (before deductions and exclusions)
	From the beginning of the fiscal year to filing date:	From	MM / DD / YYYY	to	Filing date		\$
	For prior year:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$
	For the year before that:	From	MM / DD / YYYY	to	MM / DD / YYYY		\$

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Benja Incorporated	
Name	

Debtor

Case number 20-30819\_\_\_\_\_

	ain payments or transfers to creditors withi	n 90 days befo	re filing this case	
	payments or transfers—including expense reim before filing this case unless the aggregate va sted on 4/01/22 and every 3 years after that wit	ue of all proper	ty transferred to that creditor	is less than \$6,825. (This amount may be
<b></b>	None			
	Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1.	E-Revshare Core, LLC.	08/20	\$_78,038.01	Secured debt
	223 Wall Street, Box 416 Street	09/20_		<ul><li>☐ Unsecured loan repayments</li><li>☐ Suppliers or vendors</li></ul>
	Huntington NY 11743	-		Services Other
3.2.	City State ZIP Code			_ Suci
	Sean Fleming Creditor's name	07/20	\$_37,500.00	Secured debt
	16817 Eagle Bluff Court	- 08/20		☐ Unsecured loan repayments ☐ Suppliers or vendors
	Street	00/20		Services
	Chesterfield MO 63005 City State ZIP Code	09/20		Other
guar \$6,8	anteed or cosigned by an insider unless the ag 25. (This amount may be adjusted on 4/01/22 a	gregate value o nd every 3 year	f all property transferred to or after that with respect to ca	ases filed on or after the date of adjustment.)
guar \$6,82 Do n gene	anteed or cosigned by an insider unless the agg 25. (This amount may be adjusted on 4/01/22 a ot include any payments listed in line 3. <i>Insider</i> and partners of a partnership debtor and their relebtor. 11 U.S.C. § 101(31).	gregate value o nd every 3 year s include officer	f all property transferred to or is after that with respect to ca is, directors, and anyone in co	for the benefit of the insider is less than ases filed on or after the date of adjustment.) ontrol of a corporate debtor and their relatives;
guar \$6,82 Do n gene	anteed or cosigned by an insider unless the age 25. (This amount may be adjusted on 4/01/22 a ot include any payments listed in line 3. Insider and partners of a partnership debtor and their relebtor. 11 U.S.C. § 101(31).	gregate value o nd every 3 year s include officer latives; affiliate	f all property transferred to or rs after that with respect to ca rs, directors, and anyone in ca rs of the debtor and insiders o	for the benefit of the insider is less than ases filed on or after the date of adjustment.) ontrol of a corporate debtor and their relatives; if such affiliates; and any managing agent of
guar \$6,82 Do n gene the d	anteed or cosigned by an insider unless the agg 25. (This amount may be adjusted on 4/01/22 a ot include any payments listed in line 3. <i>Insider</i> and partners of a partnership debtor and their relebtor. 11 U.S.C. § 101(31).	gregate value o nd every 3 year s include officer	f all property transferred to or is after that with respect to ca is, directors, and anyone in co	for the benefit of the insider is less than ases filed on or after the date of adjustment.) ontrol of a corporate debtor and their relatives;
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Relationship to debtor

Benja Incorporated	Case number (if known) 20-30819
	0400 (1411150) (171110111) 20 00010

Debtor

<b>X</b>	at a foreclosure sale, transferred by a d						
	None				•	porty notou in in	
	Creditor's name and address		Description of the	property	D	ate	Value of propert
5.1.			Docomption of the	proporty			value of propert
	Creditor's name						\$
	Street						
	City State ZII	P Code					
5.2.							¢.
	Creditor's name						\$
	Street						
	City State ZII	P Code					
Seto	offs						
<b>X</b>	None  Creditor's name and address		Description of t	he action creditor took		ate action was	Amount
					ta	ken	
	Creditor's name						\$
	Street						
			Last 4 digits of a	ccount number: XXXX-			
	City State Z	ZIP Code		sodan nambon 70000			
rt 3	_			oodin Humber. 70000			
<b>_eg</b> ₋ist was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investiga involved in any capacity—within 1 year	s, court a	ctions, execution trations, mediation	s, attachments, or gov	vernmental audi		ebtor
<b>∟eg</b> ∟ist was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investigation involved in any capacity—within 1 year None	s, court ac ations, arbi before filir	ctions, execution trations, mediation ng this case.	s, attachments, or gov s, and audits by federal	vernmental audi or state agencie	s in which the de	
Leg List was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investigation involved in any capacity—within 1 year None  Case title	s, court a	ctions, execution trations, mediation ng this case.	s, attachments, or gov s, and audits by federal Court or agen	vernmental audi or state agencie cy's name and ad	s in which the de	Status of case
<b>∟eg</b> ∟ist was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investigation involved in any capacity—within 1 year None	s, court ac ations, arbi before filir	ctions, execution trations, mediation ng this case.	court or agen  Twenty-First	vernmental audi or state agencie cy's name and ad Judicial Circuit	s in which the de	
<b>Leg</b> List was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investigation involved in any capacity—within 1 year None  Case title	s, court ac ations, arbi before filir	ctions, execution trations, mediation ng this case.	court or agen  Twenty-First	vernmental audi or state agencie cy's name and ad	s in which the de	Status of case  XI Pending
<b>_eg</b> _ist was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investiga involved in any capacity—within 1 year  None Case title  Busey Bank v. Benja Incorporated	s, court ac ations, arbi before filir	ctions, execution trations, mediation ng this case.	Court or agen  Twenty-First Name 105 South Court or agen Clayton	rernmental audi or state agencie cy's name and ad Judicial Circuit Central Avenue MO	dress	Status of case  Pending  On appeal
<b>_eg</b> _ist was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investigation involved in any capacity—within 1 year.  None Case title Busey Bank v. Benja Incorporated  Case number  20SL-CC05024	s, court ac ations, arbi before filir	ctions, execution trations, mediation ng this case.	Court or agen  Twenty-First Name 105 South Court or Clayton City	rernmental audi or state agencie cy's name and ad Judicial Circuit Central Avenue  MO State	dress  63105  ZIP Code	Status of case  Pending On appeal Concluded
<b>_eg</b> List was	Legal Actions or Assignments al actions, administrative proceedings the legal actions, proceedings, investiga involved in any capacity—within 1 year  None  Case title  Busey Bank v. Benja Incorporated  Case number	s, court ac ations, arbi before filir	ctions, execution trations, mediation ng this case.	Court or agen  Twenty-First Name 105 South Court or Clayton City	rernmental audi or state agencie cy's name and ad Judicial Circuit Central Avenue MO	dress  63105  ZIP Code	Status of case  Pending On appeal Concluded
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Benja Incorporated	
Name	

Debtor

Case Number 20-30819\_\_\_\_\_

List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000  None Recipient's name and address  Description of the gifts or contributions  Dates given  Value  9.1. Recipient's name  Street  City State ZIP Code  Recipient's relationship to debtor  9.2. Recipient's relationship to debtor  The state of the gifts or contributions  Street  City State ZIP Code  Recipient's relationship to debtor  The state of the gifts or contributions  Street  City State ZIP Code  Recipient's relationship to debtor  The state of the gifts or contributions  Street  City State ZIP Code  Recipient's relationship to debtor  The state of the gifts or contributions  Street  City State ZIP Code  Recipient's relationship to debtor  The state of the gifts or contributions  Street  City State ZIP Code  Recipient's relationship to debtor		signments and receivership				
None   Custodian's name and address   Description of the property   Value   S					case and any prope	rty in the
Custodian's name and address    Case title			ou omeen mamin , your polote minig and ou			
Case title  Case title  Case number  Case number  Case number  Case number  Date of order or assignment  Case number  Case number  Case number  Date of order or assignment  Case number  Cay  State  ZiP Coc  Date of order or assignment  Date of order or assignment  Cay  State  ZiP Coc  Recipient's name and address  Description of the gifts or contributions  Dates given  Value  9.1. Recipient's name and address  Description of the gifts or contributions  Dates given  Value  9.2. Recipient's relationship to debtor  Recipient's relationship to debtor  7t 5: Certain Losses  All losses from fire, theft, or other casualty within 1 year before filling this case.  Amount of payments received payments to cover the loss, for example, from insurance, cognorment compensation, or tor tlability, list the total received.  List unpaid claims on Official growthed Ar6:			Description of the property	Value		
Custodan's name    Street   Case title				\$		
Case number   Street		Custodian's name	Constitute			
City State ZIP Code  Date of order or assignment  Date of order or assignment  Date of order or assignment  City State ZIP Code  Recipient's name and address  Description of the gifts or contributions  List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filling this case unless the aggregate value of the gifts to that recipient is less than \$1,000  None  Recipient's name and address  Description of the gifts or contributions  Dates given  Value  Street  City State ZIP Code  Recipient's relationship to debtor  Street  City State ZIP Code  Recipient's relationship to debtor  All losses from fire, theft, or other casualty within 1 year before filling this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss occurred lost of lost list unperhasion or tor liability, list the total received.  List unperhasion cover the loss, for example, from insurance, government compensation, or tor liability, list the total received.  List unperhasion cover the loss. for example, from insurance, government compensation, or tor liability, list the total received.  List unperhasion cover the loss. for example, from insurance, government compensation, or tor liability, list the total received.  List unperhasion.		Street	Case title	Court	iame and address	
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City State ZP Coc  At 4: Certain Gifts and Charitable Contributions  List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000  None Recipient's name and address  Description of the gifts or contributions  Dates given  Value  Frequent's name  Street  City State ZIP Code  Recipient's relationship to debtor  Recipient's relationship to debtor  At 5: Certain Losses  All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss, for example, from insurance, powerment compensation, or tot liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:			Date of order or assignment			
List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000  None Recipient's name and address  Description of the gifts or contributions  Dates given  Value  9.1. Recipient's name Street  City State ZIP Code Recipient's relationship to debtor  City State ZIP Code Recipient's relationship to debtor  153 Certain Losses  All losses from fire, theft, or other casualty within 1 year before filing this case.  None Description of the property lost and how the loss occurred  Amount of payments received for the loss, for example, from insurance, government compensation, or tot filiability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B:				City	State	ZIP Code
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Street  City State ZIP Code  Recipient's relationship to debtor  Recipient's relationship to debtor  All losses from fire, theft, or other casualty within 1 year before filling this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:		City State ZIP Code				
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Street  City State ZIP Code  Recipient's relationship to debtor  Tt 5: Certain Losses  All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss occurred if you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:						
Street  City State ZIP Code  Recipient's relationship to debtor  Tt 5: Certain Losses  All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss if you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:						
Street  City State ZIP Code  Recipient's relationship to debtor  11 5: Certain Losses  All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss occurred loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:						
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Recipient's relationship to debtor  Tt 5: Certain Losses  All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss occurred lf you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	9.2					\$
All losses from fire, theft, or other casualty within 1 year before filling this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	9.2	Street				\$
All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	9.2	Street  City State ZIP Code				\$
All losses from fire, theft, or other casualty within 1 year before filing this case.  None  Description of the property lost and how the loss occurred  Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	9.2	Street  City State ZIP Code				\$
Description of the property lost and how the loss occurred  Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	9.2	Street  City State ZIP Code				\$
Description of the property lost and how the loss occurred  Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:		Street  City State ZIP Code  Recipient's relationship to debtor				\$
Description of the property lost and how the loss occurred  Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	rŧ	City State ZIP Code  Recipient's relationship to debtor  Certain Losses				\$
occurred  If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	r <b>t</b>	City State ZIP Code  Recipient's relationship to debtor  Certain Losses  Certain Losses	1 year before filing this case.			\$
example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B:	rt.	City State ZIP Code  Recipient's relationship to debtor  Certain Losses  Certain Losses  Rosses from fire, theft, or other casualty within None	1 year before filing this case.			
List unpaid claims on Official Form 106A/B (Schedule A/B:	rt All	Street  City State ZIP Code  Recipient's relationship to debtor  Certain Losses  Contain Losses  Contain Losses  Contain Losses  Contain Losses  Contain Losses	Amount of payments received for the loss		Date of loss	Value of proper
	ri: All	Street  City State ZIP Code  Recipient's relationship to debtor  Certain Losses  Contain Losses  Contain Losses  Contain Losses  Contain Losses  Contain Losses	Amount of payments received for the loss If you have received payments to cover the lexample, from insurance, government compa	oss, for	Date of loss	Value of proper
	rti All	Street  City State ZIP Code  Recipient's relationship to debtor  Certain Losses  Contain Losses  Contain Losses  Contain Losses  Contain Losses  Contain Losses	Amount of payments received for the loss of you have received payments to cover the lexample, from insurance, government competent liability, list the total received.	oss, for ensation, or	Date of loss	Value of proper

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Benja	Incorporated

Name

Debtor

Case number 20-30819\_\_\_\_\_

Part 6:	Certain Payments or Transfers			
List a		erty made by the debtor or person acting on behalf of the ding attorneys, that the debtor consulted about debt con	•	
<b>X</b> 1	None			
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.				\$
	Address			
	Street			
	City State ZIP Code			
	Email or website address			
	Who made the payment, if not debtor?			
	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.				\$
	Address			Φ
	Street			
	City State ZIP Code  Email or website address			
	Email or website address			
	Who made the payment, if not debtor?			
	settled trusts of which the debtor is a benefici			
a se	any payments or transfers of property made by the If-settled trust or similar device. not include transfers already listed on this stateme	e debtor or a person acting on behalf of the debtor within	n 10 years before the	e filing of this case to
	None			
	Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
				\$
	Trustee			

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Benja	Incorporated	 	

Name

San Francisco

City

Debtor

Case number 20-30819\_\_\_\_\_

	nsfers not already listed on this statement				15 511 111
with	any transfers of money or other property—by sale nin 2 years before the filing of this case to another pude both outright transfers and transfers made as	erson, other than property transfe	rred in the ordinary cou	urse of business or	financial affairs.
	None				
	Who received transfer?	Description of property transferred or debts paid in exchange	d or payments received	Date transfer was made	Total amount or value
13.1.	Thomas B. Peters	Return of investment	·	9/25/20	\$ <u>250,000.0</u> 0
	Address				
	Street				
	City State ZIP Code				
	Relationship to debtor				
	Who received transfer?				\$
13.2.					¥
	Address				
	Street				
	City State ZIP Code				
	Relationship to debtor				
Part 7	Previous Locations				
	vious addresses all previous addresses used by the debtor within 3	years before filing this case and the	ne dates the addresses	were used.	
	Does not apply		Potent.		
	Address  1355 Market Street			01/2019	To 11/2019
14.1.	Street		From	01/2019	To <u>11/2019</u>
	San Francisco City Sta	CA 94103 Ite ZIP Code			
14.2.	10 Lyon Street		From	06/2018	To <u>12/2018</u>

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94116

ZIP Code

CA

State

Benja	Incorporated
Name	

Debtor	
	N

Case number (if known)20-30819	
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Part 8			
	Health Care Bankruptcies		
15. Hea	lth Care bankruptcies		
Is th	e debtor primarily engaged in offering servi	ces and facilities for:	
_	diagnosing or treating injury, deformity, or d	lisease, or	
_	providing any surgical, psychiatric, drug trea	atment, or obstetric care?	
X	No. Go to Part 9.		
	Yes. Fill in the information below.		
	Facility name and address	Nature of the business operation, including type of services the	If debtor provides meals
	r dentity frame and address	debtor provides	and housing, number of
			patients in debtor's care
15.1.			
	Facility name		
	Street	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept?
		_	Check all that apply:
			_
	City State ZIP Code		<ul><li>☑ Electronically</li><li>☑ Paper</li></ul>
			<b>—</b> Рареі
	Facility name and address	Nature of the business operation, including type of services the	If debtor provides meals
		debtor provides	and housing, number of patients in debtor's care
15.2.	Facility name		
	Street	Location where patient records are maintained (if different from facility	How are records kept?
		address). If electronic, identify any service provider.	
			Check all that apply:
	City State ZIP Code		☐ Electronically
	City State ZIP Code		_
ert 9	_		☐ Electronically
Part 9	_		☐ Electronically
	_		☐ Electronically
	Personally Identifiable Informates the debtor collect and retain personally		☐ Electronically
6. Doe	Personally Identifiable Informates the debtor collect and retain personally	y identifiable information of customers?	☐ Electronically
6. Doe	Personally Identifiable Information is the debtor collect and retain personally No.	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses	☐ Electronically
6. Doe	Personally Identifiable Information to the debtor collect and retain personally No.  Yes. State the nature of the information collections.	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses	☐ Electronically
6. Doe	Personally Identifiable Information sometimes the debtor collect and retain personally.  No.  Yes. State the nature of the information collect the debtor have a privacy policy.	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses	☐ Electronically
6. Doe	Personally Identifiable Information so the debtor collect and retain personally No.  Yes. State the nature of the information coll Does the debtor have a privacy policy  No Yes	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?	☐ Electronically ☐ Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally No.  Yes. State the nature of the information coll Does the debtor have a privacy policy  No Yes  No Yes  No Yes	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses	☐ Electronically ☐ Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally No.  Yes. State the nature of the information coll Does the debtor have a privacy policy  No Yes  No Yes  No Yes  No personally Identifiable Information and Personally No N	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  In employees of the debtor been participants in any ERISA, 401(k), 4	☐ Electronically ☐ Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally No.  Yes. State the nature of the information coll Does the debtor have a privacy policy  No Yes  No Yes  No Yes	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Interpretation of customers?	☐ Electronically ☐ Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally.  No.  Yes. State the nature of the information collect and privacy policy.  No.  No.  Yes  This is years before filing this case, have a sision or profit-sharing plan made available.  No. Go to Part 10.  Yes. Does the debtor serve as plan administration.	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Interpretation of customers?	☐ Electronically ☐ Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally.  No.  Yes. State the nature of the information collect and privacy policy.  No.  Yes.  No.  Yes.  No.  Yes.  No.  Go to Part 10.  Yes. Does the debtor serve as plan administration.	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Interpretation of customers?	☐ Electronically ☐ Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally.  No.  Yes. State the nature of the information collect and privacy policy.  No.  No.  Yes  This is years before filing this case, have a sision or profit-sharing plan made available.  No. Go to Part 10.  Yes. Does the debtor serve as plan administration.	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Interpretation of customers?	Electronically Paper  Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally.  No.  Yes. State the nature of the information collect and privacy policy.  No.  Yes.  No.  Yes.  No.  Yes.  No.  Yes.  No. Go to Part 10.  Yes. Does the debtor serve as plan administration.  Yes. Fill in below:	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Introduction and the debtor been participants in any ERISA, 401(k), 4 le by the debtor as an employee benefit?  Strator?  Employer identification	Electronically Paper  Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally.  No.  Yes. State the nature of the information collect and privacy policy.  No.  Yes.  No.  Yes.  No.  Yes.  No.  Yes.  No. Go to Part 10.  Yes. Does the debtor serve as plan administration.  Yes. Fill in below:	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Interpretation of customers?  Interpretation of customers.  Interpretation of custom	Electronically Paper  Paper
6. Doe	Personally Identifiable Information so the debtor collect and retain personally.  No.  Yes. State the nature of the information collect and privacy policy.  No.  Yes.  No.  Yes.  No.  Yes.  No.  Yes.  No. Go to Part 10.  Yes. Does the debtor serve as plan administration.  Yes. Fill in below:	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Introduction and the debtor been participants in any ERISA, 401(k), 4 le by the debtor as an employee benefit?  Strator?  Employer identification	Electronically Paper  Paper
7. With pen	Personally Identifiable Information is the debtor collect and retain personally.  No.  Yes. State the nature of the information coll.  Does the debtor have a privacy policy.  No.  Yes.  No.  Yes.  No. Go to Part 10.  Yes. Does the debtor serve as plan administration.  Yes. Fill in below:  Name of plan	y identifiable information of customers?  lected and retained. Names, physical addresses, e-mail addresses about that information?  Introduction and the debtor been participants in any ERISA, 401(k), 4 le by the debtor as an employee benefit?  Strator?  Employer identification	Electronically Paper  O3(b), or other

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Benja	Incorporated
Name	

Debtor	Е
	Na

Case number	20-30819	

Part 1	0 <sub>F</sub> Certaiı	n Financial Ac	counts, Saf	e Deposit Boxes, and S	torage Uni	its		
With mov Incl	ved, or transfe ude checking,	ore filing this case erred? , savings, money	market, or oth	nancial accounts or instrumer ner financial accounts; certific and other financial institutions	ates of depo			efit, closed, sold,
X	None							
	Financial ins	titution name and	address	Last 4 digits of account number	Type of a	account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.				xxxx	☐ Chec	king		œ.
	Name			^^^	. 🔲 Savir	_		- \$ <u> </u>
	Street				☐ Mone	ey market		
					☐ Broke	erage		
	City	State	ZIP Code		Other	r	-	
18.2.				XXXX	☐ Chec	king		. \$
	Name				Savir	ngs		- Ψ
	Street				☐ Mone	ey market		
					☐ Broke	erage		
	City	State	ZIP Code		Other	r	_	
	None Depository	institution name a	and address	Names of anyone with acce	ess to it	Description	of the contents	Does debtor still have it?
	Name		<del>-</del>					□ No □ Yes
	Street							_
	City	State	ZIP Code	Address				
List		-	nits or warehou	uses within 1 year before filin	g this case. [	- - Do not include fa	acilities that are in a par	t of a building in
	None							
		ne and address		Names of anyone with acce	ess to it	Description o	f the contents	Does debtor still have it?
	WCB War	ehouse		Third party		Physical inv	rentory	□ No □ Yes
		south Drive						<del>-</del>
	Austin	TX State	78744 ZIP Code	Address				
	-							

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Benja	Incor	porated

Nan

Debtor

Case number 20-30819\_\_\_\_\_

	lone	trols that another entity owns. Include any p	property borrowed from, being stored for	or, or held in
	Owner's name and address	Location of the property	Description of the property	Value
				\$
	Name			
	Street			
		<u> </u>		
	City State ZIP Code			
rt 12	Details About Environmental	Information		
the p	ourpose of Part 12, the following definition	ons apply:		
	conmental law means any statute or gover dless of the medium affected (air, land,	ernmental regulation that concerns pollution water, or any other medium).	, contamination, or hazardous materia	al,
S <i>ite</i> n	•	including disposal sites, that the debtor now	v owns, operates, or utilizes or that the	e debtor
	rdous material means anything that an esimilarly harmful substance.	environmental law defines as hazardous or	toxic, or describes as a pollutant, cont	aminant,
ort a	all notices, releases, and proceedings	known, regardless of when they occurre	ed.	
	lo fes. Provide details below.  Case title	Court or agency name and address	Nature of the case	
				_
	Case number	Name	· ————————————————————————————————————	Pending
	Case number			Pending On appeal
	Case number	Name		Pending On appeal
	Case number			On appeal

Official Form 207 Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy page 9 Case: 20-30819 Doc# 50 Filed: 11/17/20 Entered: 11/17/20 10:04:37 Page 9 of 14

Benja	Incor	porated

Name

Debtor

Case number (if known)\_20-30819\_

Name   Na	Site name and address	Governmental unit name and address	Environmental law, if known Date of notice
Details About the Debtor's Business or Connections to Any Business  er businesses in which the debtor has or has had an interest any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case.  ude this information even if already listed in the Schedules.  None  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  Dates business existed  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  From To  Dates business existed  From To  Dates business existed  From To  Dates business existed  Employer Identification number Do not include Social Security number or ITIN.  EIN:  —	one mame and address	Covernmental unit frame and address	Date of Hotice
State   ZIP Code   City   State   ZIP Code   City   State   ZIP Code	Name	Name	
Details About the Debtor's Business or Connections to Any Business  er businesses in which the debtor has or has had an interest any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case.  ude this information even if already listed in the Schedules.  None  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:	Street	Street	
ary businesses in which the debtor has or has had an interest any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filling this case.  ude this information even if already listed in the Schedules.  None    Business name and address	City State ZIF	Code City State ZIP Code	
er businesses in which the debtor has or has had an interest any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case.  ude this information even if already listed in the Schedules.  None    Business name and address			
rer businesses in which the debtor has or has had an interest any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. ude this information even if already listed in the Schedules.  None    Business name and address			
any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filling this case. ude this information even if already listed in the Schedules.  None    Business name and address	3: Details About the Deb	or's Business or Connections to Any Busin	ness
any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filling this case. ude this information even if already listed in the Schedules.  None    Business name and address			
Business name and address   Describe the nature of the business   Employer Identification number   Do not include Social Security number or ITIN.   EIN:	er businesses in which the debt	or has or has had an interest	
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  EIN:  Dates business existed  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  Dates business existed	any business for which the debtor	was an owner, partner, member, or otherwise a pers	son in control within 6 years before filing this case.
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:	ude this information even if alread	listed in the Schedules.	
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:	None		
Do not include Social Security number or ITIN.  EIN:	None		
Do not include Social Security number or ITIN.  EIN:			
EIN:     Dates business existed	Business name and address	Describe the nature of the business	
Dates business existed			
Street  City State ZIP Code  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN: Dates business existed  From To  EIN: Dates business existed  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  From To  Employer Identification number Do not include Social Security number or ITIN.  EIN: Dates business existed  From To  Dates business existed			EIN:
Business name and address   Describe the nature of the business   Employer Identification number Do not include Social Security number or ITIN.	Name		Dates business existed
Business name and address   Describe the nature of the business   Employer Identification number Do not include Social Security number or ITIN.	Stroot		
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN: Dates business existed  From To  Business name and address  Describe the nature of the business  Employer Identification number To  Employer Identification number Do not include Social Security number or ITIN.  EIN:  From To  EIN:  Dates business existed  From To  Dates business existed  From To  From To	Outtl		From
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  Business name and address  Describe the nature of the business  Employer Identification number From To  Eln:  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  To			FIOIII 10
Do not include Social Security number or ITIN.  EIN:	City State ZIF	Code	
Do not include Social Security number or ITIN.  EIN:			
Do not include Social Security number or ITIN.  EIN:	B	B	First cold of a
Name Street  City State ZIP Code  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Entry  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  From To	Business name and address	Describe the nature of the business	
Street  Street  City State ZIP Code  Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To  Dates business existed  From To			20 not moded obtain obtainly framed of Trive.
Street    Street   From To   City   State   ZIP Code			
From To			EIN:
From To	Name		
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To			
Business name and address  Describe the nature of the business  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To			Dates business existed
Name  Street  Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To			Dates business existed
Name  Street  Do not include Social Security number or ITIN.  EIN:  Dates business existed  From To	Street	Code	Dates business existed
Do not include Social Security number or ITIN.	Street	Code	Dates business existed
Name  Street  From To	Street  City State ZIF		Prom To
Name  Street  From To	Street  City State ZIF		From To  Employer Identification number
Street Dates business existed From To	Street  City State ZIF		From To  Employer Identification number Do not include Social Security number or ITIN.
From To	Street  City State ZIF  Business name and address		From To  Employer Identification number Do not include Social Security number or ITIN.
	Street  City State ZIF  Business name and address		From To  Employer Identification number Do not include Social Security number or ITIN.  EIN:
	Street  City State ZIF  Business name and address  Name		From To  Employer Identification number Do not include Social Security number or ITIN.  EIN:
City State ZIP Code	Street  City State ZIF  Business name and address  Name		Prom To  Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed
	Street  City State ZIF  Business name and address  Name  Street	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  EIN:  Dates business existed

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ч	None				
N	lame and address			Dates of service	
				From	То
N	ame				
S	treet				
_		Objete	71D O- d-	_	
C	ity	State	ZIP Code		
N	lame and address			Dates of service	
_				From	То
N	ame				
S	treet				
	ity	State	ZIP Code	<del>-</del>	
	•				
b.1.	Name			_	То
	Street			_	
	Street			_ _ _	
	Street	State	ZIP Code		
	Street	State	ZIP Code	Dates of service	
6b.2.	City  Name and address	State	ZIP Code	Dates of service	To
6b.2.	City  Name and address	State	ZIP Code		То
6b.2.	City  Name and address	State	ZIP Code		To
b.2.	City  Name and address  Name  Street				To
b.2.	City  Name and address	State	ZIP Code		To
List	Street  City  Name and address  Name  Street  City  t all firms or individuals who were in	State	ZIP Code	From	
List	Street  City  Name and address  Name  Street  City	State	ZIP Code	From   cords when this case i	s filed.
List	Street  City  Name and address  Name  Street  City  t all firms or individuals who were in	State	ZIP Code	From   cords when this case i	s filed.
List	Street  City  Name and address  Name  Street  City  t all firms or individuals who were in None  Name and address  Andrew J. Chapin	State	ZIP Code	From  From  cords when this case in the cas	s filed.
List	Street  City  Name and address  Name  Street  City  t all firms or individuals who were in None  Name and address  Andrew J. Chapin  Name 845 Market Street, 450A	State	ZIP Code	From  From  cords when this case in the cas	s filed.
List	Street  City  Name and address  Name  Street  City  t all firms or individuals who were in None  Name and address  Andrew J. Chapin  Name	State	ZIP Code	From  From  cords when this case in the cas	s filed.
:. List	Street  City  Name and address  Name  Street  City  t all firms or individuals who were in None  Name and address  Andrew J. Chapin  Name 845 Market Street, 450A	State	ZIP Code	From  From  cords when this case in the cas	s filed.

Benja incorporated	
Jame	

	Name and address			If any books of account and records are unavailable, explain why
26	c.2.			
	Name			
	Street			
	City	State	ZIP Code	
	S., y	Cuto	0000	
26d.	List all financial institutions, creditors, and within 2 years before filing this case.	other parties, including merc	cantile and trade agenc	ies, to whom the debtor issued a financial statement
	☐ None			
	Name and address			
26	Busey Bank			
	Name 100 West University Avenue			
	Street			
	Champaign City	IL State	61840 ZIP Code	
	·			
	Name and address			
26	E-Revshare Core, LLC.			
	223 Wall Street, Box 416 Street			
	Huntington	NY	11743	
	City	State	ZIP Code	
27. <b>Inve</b>	ntories			
	any inventories of the debtor's property be	een taken within 2 years bef	ore filing this case?	
<b>X</b>		ant inventories		
<b>–</b> 1	es. Give the details about the two most rec	ent inventories.		
	Name of the person who supervised the taking	ng of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
				\$
	Name and address of the person who has po	ssession of inventory records	5	
27.1.	Name			
	Street			
	Succi			
	City	State	ZIP Code	

п	П	$\sim$	h	4.	_	,

	Name of the person who supervis	ed the taking of the	inventory		Date of nventory		asis) of each		s (cost, market, or ry
	Name and address of the person	who has possession	of inventory reco	rds		Ψ			
7.2.	Name								
	Street								
	city the debtor's officers, directors uple in control of the debtor at ti			ZIP Code	rs in contro	ol, contro	lling share	holders	s, or other
peo	Name	Address	y or tills case.		Posit	tion and na	ture of any		% of interest, if any
	Andrew J. Chapin		Avenue, San Fra	ancisco. CA	intere				48%
of tl	nin 1 year before the filing of the debtor, or shareholders in convolution of the debtor, or shareholders in convolution of the debt.					members	, general pa	artners	, members in con
of tl	<mark>he debtor, or shareholders in c</mark> o No				ositions?	members		Perio	, members in con od during which ion or interest was
of ti	he debtor, or shareholders in conversion of Non Yes. Identify below.	ontrol of the debto			ositions?	tion and na nterest		Peric posit held	od during which
of tl	he debtor, or shareholders in constant No No Yes. Identify below.	ontrol of the debto			Positions?	tion and na nterest		Perio posit held From	od during which ion or interest was
of tl	he debtor, or shareholders in convolution No Yes. Identify below.  Name  Nick Foppe	ontrol of the debto			Positions?  Positions?  Direct	tion and na nterest		Peric posit held From	od during which ion or interest was 07/20 To 9/20
of tl	he debtor, or shareholders in construction of No Yes. Identify below.  Name  Nick Foppe  Scott Sklar	Address	or who no longe	r hold these p	Positions?  Positions?  Direct	tion and na nterest		Peric posit held From	07/20 To 9/20 07/20 To 9/20 07/20 To 9/20 To
Pay With	he debtor, or shareholders in convolution No Yes. Identify below.  Name  Nick Foppe	Address  awals credited or good the debtor provide	given to insiders	r hold these po	Positions?  Positions in the property of the p	tion and na nterest ctor	ature of	Period positive held From From From From	0d during which cion or interest was 07/20 To 9/20 07/20 To 9/20 To
Payy With bon	he debtor, or shareholders in consolers. No Yes. Identify below.  Name  Nick Foppe Scott Sklar  rments, distributions, or withdramin 1 year before filing this case, couses, loans, credits on loans, stocks.	Address  awals credited or good the debtor provide	given to insiders	r hold these po	Positions?  Positions in the property of the p	tion and na nterest ctor	ature of	Period positive held From From From From	0d during which cion or interest was 07/20 To 9/20 07/20 To 9/20 To
Pay With bon	he debtor, or shareholders in construction of the debtor, or shareholders in construction of the debtor, or shareholders in construction.  Name  Nick Foppe Scott Sklar  Tements, distributions, or withdrawn of the debtor of the	Address  awals credited or good the debtor provide	given to insiders	s n value in any foed?	Positions?  Positions in the property of the p	tion and na nterest ctor ctor	ature of	Period positive held From From From From	od during which ion or interest was 07/20 To 9/20 07/20 To 9/20 To
Payy With bon	he debtor, or shareholders in consolers. No Yes. Identify below.  Name  Nick Foppe Scott Sklar  Tements, distributions, or withdration 1 year before filing this case, of uses, loans, credits on loans, stock No Yes. Identify below.	Address  awals credited or good the debtor provide	given to insiders	s n value in any fored?  Amount or description	Positions?  Positions?  Direct  Direct  Direct  The money or n and value	tion and na nterest ctor ctor	other comp	Period positive held From From From From	od during which ion or interest was  07/20 To 9/20  07/20 To 9/20  To To  To  n, draws,
Pay With bon	he debtor, or shareholders in consolers. No Yes. Identify below.  Name  Nick Foppe Scott Sklar  Timents, distributions, or withdramin 1 year before filing this case, ouses, loans, credits on loans, stock No Yes. Identify below.  Name and address of recipient  Andrew J. Chapin Name	Address  awals credited or good the debtor provide	given to insiders	Amount or description property	Positions?  Positions?  Direct  Direct  Direct  The money or n and value	tion and na nterest ctor ctor	other comp	Period positive held From From From From	od during which cion or interest was  O7/20 To 9/20  O7/20 To 9/20  To  To  n, draws,  Reason for providing the value
Pay With bon	he debtor, or shareholders in consolers. No Yes. Identify below.  Name  Nick Foppe Scott Sklar  Tements, distributions, or withdramin 1 year before filing this case, ouses, loans, credits on loans, stock No Yes. Identify below.  Name and address of recipient  Andrew J. Chapin Name 26 Cragmont Avenue	Address  awals credited or good the debtor provide	given to insiders	Amount or description property	Positions?  Positions?  Direct  Direct  Direct  The money or n and value	tion and na nterest ctor ctor	other comp	Period positive held From From From From	od during which cion or interest was  O7/20 To 9/20  O7/20 To 9/20  To  To  n, draws,  Reason for providing the value

Official Form 207
Case: 20-30819

Debtor	Benja Incorporated

Case number (if known) 20-30819

	Name and address of recipient							
30.2	Name							
	Street							
	City	State	ZIP Code					
	Relationship to debtor							
	relationship to debtor							
31. <b>With</b>	in 6 years before filing this case, h	as the debtor b	oeen a member	of any consolidated g	group for tax pur	rposes?		
	Yes. Identify below.							
	Name of the parent corporation				mployer Identificati	ion number of t	he parent	
					N: –			
					— —			
X I	in 6 years before filing this case, h No Yes. Identify below.	ias the debtol o	is an employer i	occii responsibile IOI	continuumy to a	a pension iun	u :	
	<b>,</b>							
	Name of the pension fund				nployer Identificati		<del>-</del>	I
	·				nployer Identificati		<del>-</del>	I
Part 1	Name of the pension fund	serious crime. Man result in fines	-	EIN	vi:	ng money or pr		
Part 1	Name of the pension fund  Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case cannection with a bankruptcy case cannection.	serious crime. M an result in fines 1571.	up to \$500,000	EIN tement, concealing pro or imprisonment for up	operty, or obtaining to 20 years, or b	ng money or prooth.	operty by frauc	l in
Part 1	Name of the pension fund  Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case of the U.S.C. §§ 152, 1341, 1519, and 30 I have examined the information in the	serious crime. Man result in fines 1571.	up to \$500,000  Financial Affairs	tement, concealing pro or imprisonment for up and any attachments a	operty, or obtaining to 20 years, or b	ng money or prooth.	operty by frauc	l in
Part 1	Name of the pension fund  Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case of 18 U.S.C. §§ 152, 1341, 1519, and 3 I have examined the information in this true and correct.	serious crime. Man result in fines 1571.	up to \$500,000  Financial Affairs	tement, concealing pro or imprisonment for up and any attachments a	operty, or obtaining to 20 years, or b	ng money or prooth.	operty by frauc	l in
Part 1	Name of the pension fund  4: Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case of 18 U.S.C. §§ 152, 1341, 1519, and 3 I have examined the information in the istrue and correct.  I declare under penalty of perjury that Executed on   11/16/2020  MM / DD / YYYYY	serious crime. Man result in fines 1571.	up to \$500,000  Financial Affairs	tement, concealing proor imprisonment for up and any attachments a	operty, or obtaining to 20 years, or be	ng money or prooth.	operty by frauc	l in
Part 1	Name of the pension fund  4: Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case of 18 U.S.C. §§ 152, 1341, 1519, and 3 I have examined the information in the istrue and correct.  I declare under penalty of perjury that Executed on   11/16/2020  MM / DD / YYYYY	serious crime. Man result in fines 1571.  In Statement of the state of	up to \$500,000  Financial Affairs	tement, concealing pro or imprisonment for up and any attachments a	operty, or obtaining to 20 years, or be	ng money or prooth.	operty by frauc	l in
Part 1	Name of the pension fund  Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case of 18 U.S.C. §§ 152, 1341, 1519, and 3 I have examined the information in this true and correct.  I declare under penalty of perjury that Executed on 11/16/2020  MM / DD / YYYYY	serious crime. Man result in fines 1571.  Inis Statement of the foregoing in the foregoing in the foregoing in the debtor	up to \$500,000  Financial Affairs	tement, concealing proor imprisonment for up and any attachments a	operty, or obtaining to 20 years, or be	ng money or prooth.	operty by frauc	l in
Part 1	Name of the pension fund  Signature and Declaration  WARNING Bankruptcy fraud is a seconnection with a bankruptcy case of 18 U.S.C. §§ 152, 1341, 1519, and 3 I have examined the information in the istrue and correct.  I declare under penalty of perjury that Executed on 11/16/2020 MM / DD / YYYYY  Signature of individual signing on behalf of Position or relationship to debtor President Presi	serious crime. Man result in fines 5571.  his Statement of the foregoing is of the debtor sident & CEO	Financial Affairs s true and correct	tement, concealing proor imprisonment for up and any attachments at t.  Printed name Andre	operty, or obtaining to 20 years, or be and have a reaso	ng money or proof.	operty by frauc	l in
Part 1	WARNING Bankruptcy fraud is a sconnection with a bankruptcy case consection with a bankruptcy case constitution in the strue and correct.  I declare under penalty of perjury that is true and correct.  Executed on 11/16/2020 MM / DD / YYYYY	serious crime. Man result in fines 5571.  his Statement of the foregoing is of the debtor sident & CEO	Financial Affairs s true and correct	tement, concealing proor imprisonment for up and any attachments at t.  Printed name Andre	operty, or obtaining to 20 years, or be and have a reaso	ng money or proof.	operty by frauc	l in

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